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PTO/SB/82 (09-03)  
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Application Number	09/732,953
Filing Date	Dec.7,2000
First Named Inventor	FEHER, KAMILO
Art Unit	2734
Examiner Name	
Attorney Docket Number	Contin of 09/385,693 Aug30.99

**I hereby revoke all previous powers of attorney given in the above-identified application.**

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name Kamilo FEHER

Signature *K. Feher*

Date June 9, 2004 Telephone 1-530-753-0738

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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